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SCANNED JUN 0 9 2014

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury

▶ Do not enter Social Security numbers on this form as it may be made public.

| 111101 | nai nevenu | | | <u>u. </u> | ino peotion | | | | | | |
|--|---|--|------------------|---|--------------------------------------|--|--|--|--|--|--|
| <u>A</u> | For the | 2013 calendar year, or tax year beginning January 1 , 2013, and end | ing Decer | nber 31 | , 20 13 | | | | | | |
| В | Check if a | applicable C Name of organization International Union, UAW, Local 653 | - | D Employer identification number | | | | | | | |
| | Address | change Doing Business As Labor Union | | 38-1119397 | | | | | | | |
| | Name cha | Ange Number and street (or P O box if mail is not delivered to street address) Room/s | suite | E Telepho | ne number | | | | | | |
| \checkmark | Initial retu | 670 E Walton Blvd | | | 248-373-7774 | | | | | | |
| | Terminate | City or town, state or province, country, and ZIP or foreign postal code | | | | | | | | | |
| $\overline{\Box}$ | Amended | return Pontiac, MI 48340 | | G Gross re | eceipts \$ 1,133,174 | | | | | | |
| $\bar{\Box}$ | | on pending F Name and address of principal officer Michael G. Warchuck | H(a) to this a r | | subordinates ² ☐ Yes ☑ No | | | | | | |
| _ | Application | · | | | | | | | | | |
| _ | / 670 E. Walton Blvd., Pontiac, MI 48340 H(b) Are all subordinates included? L Yes L No I Tax expense status | | | | | | | | | | |
| ÷ | Tax-exem | | | | • | | | | | | |
| J Website: ► http://region1.uaw.org/local653/ H(c) Group exemption number ► 0427 | | | | | | | | | | | |
| | | rganization ☐ Corporation ☐ Trust | ation 1939 | M State | of legal domicite MI | | | | | | |
| ۲ | art I | Summary | | | | | | | | | |
| | 1 1 | Briefly describe the organization's mission or most significant activities: Prom | ote social and | l econom | ic justice through | | | | | | |
| Activities & Governance | 1 : | collective bargaining, meetings, education, communication, organizing new bargai | ning units, co | mmunity a | action, administration of | | | | | | |
| Jar |] : | the organization, maintenance of its property and assets, delivery of benefits to rep | resented mer | nbers, fra | ternal and social | | | | | | |
| /eri | 2 | Check this box $ ightharpoonup$ if the organization discontinued its operations or disposed | of more than | 1 25% of | its net assets. | | | | | | |
| ó | 3 | Number of voting members of the governing body (Part VI, line 1a) | | 3 | 18 | | | | | | |
| ď | 4 | Number of independent voting members of the governing body (Part VI, line 1b | o) | 4 | 16 | | | | | | |
| ies | l . | Total number of individuals employed in calendar year 2013 (Part V, line 2a) | | 5 | 32 | | | | | | |
| ξ | L. | Total number of volunteers (estimate if necessary) | | 6 | 45 | | | | | | |
| Ç | 1 | Total unrelated business revenue from Part VIII, column (C), line 12 | | 7a | 0 | | | | | | |
| • | l . | Net unrelated business taxable income from Form 990-T, line 34 | | 7b | | | | | | | |
| _ | B | Net differenced business taxable income from 1 offit 350-1, line 34 | Prior Y | | Current Year | | | | | | |
| Revenue | ١., | Contributions and syents (Dout VIII) line 1h | | | | | | | | | |
| | l . | Contributions and grants (Part VIII, line 1h) | | 0 | 5523 | | | | | | |
| | 1 | Program service revenue (Part VIII, line 2g) | | 1085404 | 1079668 | | | | | | |
| è | 1 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | 36 | | | | | | | |
| _ | | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 128012 | 41927 | | | | | | |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 1213452 | 1127151 | | | | | | |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 0 | 0 | | | | | | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0 | 0 | | | | | | |
| Ø | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 310973 | 331982 | | | | | | |
| Expenses | | Professional fundraising fees (Part IX, column (A), line 11e) | | 0 | | | | | | | |
| De l | 1 | Total fundraising expenses (Part IX, column (D), line 25) ▶ 0 | | | | | | | | | |
| Щ | 1 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 925933 79865 | | | | | | | |
| | | Total expenses. Add lines 13–17*(mustrequal Part X_column (A), line 25) | | 1236906 | 798655 | | | | | | |
| | | Revenue less expenses. Subtract line 8 trong line 12 D | | | | | | | | | |
| | | | Beginning of C | _(23454) | End of Year | | | | | | |
| Net Assets or Fund Balances | | Table and (Bat) Last (S | Degining of O | | | | | | | | |
| Sse | 20 | Total assets (Part X, line 16) Total liabilities (Part X, line 26) | | 2924809 | 2921345 | | | | | | |
| a t | 21 | Total liabilities (Part X, line 26) MAY 1 4 2014 | | 39916 | 40567 | | | | | | |
| | | Net assets or fund balances. Subtract-line-21-from-line-20—1: | | 2884893 | 2880778 | | | | | | |
| 2 | art II | Signature Block OGDEN UT | | | | | | | | | |
| | | ies of perjury, I declare that I have examined this return, including accompanying schedules and sta | | | my knowledge and belief, it is | | | | | | |
| tru | e, correct, | and complete Declaration of preparer (other than officer) is based on all information of which prepare | rer nas any know | leage | | | | | | | |
| | | Stames C. Bailey | 5 | 15/2014 | | | | | | | |
| Sign | | Signature of officer O | Da | ate | | | | | | | |
| He | re | James C. Bailey, Financial Sec.y | | | | | | | | | |
| | | Type or print name and title | | | | | | | | | |
| <u> </u> | | Print/Type preparer's name Preparer's signature | Date | Chart | PTIN | | | | | | |
| Pa | | | | Check self-em | | | | | | | |
| | eparei | | | | <u> </u> | | | | | | |
| Us | e Only | / Firm's name ► Firm's address ► | | n's EIN ▶ one no | | | | | | | |
| Ma | | | | | | | | | | | |
| _ | | S discuss this return with the preparer shown above? (see instructions) | | <u> </u> | Yes No | | | | | | |
| For | Paperw | ork Reduction Act Notice, see the separate instructions. Cat | No 11282Y | | Form 990 (2013) | | | | | | |



| 1 01111 33 | 0 (2010) | | | | | , ugo <u>—</u> |
|------------|-------------------|--------------------------|----------------------|---------------------------|-----------------------------------|-----------------------|
| Part | | nt of Program Servic | | | | |
| | | | | te to any line in this P | Part III | <u> </u> |
| 1 | • | the organization's mis | | | | |
| | | | | | ucation, communication, organiz | |
| | | | | | operty and assets, delivery of bo | |
| | represented mer | mbers, fraternal and soc | al activities and re | lated activities which fu | urther the common interests of t | he membership. |
| | Did the organiz | ation undertake any sig | inificant program | services during the ve | ear which were not listed on the | |
| _ | | | | | | |
| | | be these new services of | | | | |
| 3 | Did the organi | | | nificant changes in h | now it conducts, any progra | m |
| | services? | | | | | ☐ Yes 🗹 No |
| | if "Yes," describ | be these changes on Se | chedule O. | | | |
| 4 | | | | | s three largest program servic | |
| | | | | | rt the amount of grants and a | llocations to others, |
| | the total expens | ses, and revenue, if any | , for each program | m service reported. | | |
| | | \ /E | | | 71/2 \ (D | N/A) |
| 4a | | | | | N/A) (Revenue \$ | |
| | | | | | ••••• | |
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| 4b | (Code: |) (Expenses \$ | N/A ıncludi | ng grants of \$ | N/A) (Revenue \$ | N/A) |
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| 4c | (Code. |) (Expenses \$ | N/A ıncludı | ng grants of \$ | N/A) (Revenue \$ | N/A) |
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| 4d | | services (Describe in S | | | | |
| | (Expenses \$ | N/A including | grants of \$ | N/A) (Revenue | s\$ N/A) | |
| 4e | Total program | service expenses 🕨 | | | | |

| Part | V Checklist of Required Schedules | | | |
|------|--|-----|----------|----------------|
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | | / |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? | 2 | | ✓ |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 1 |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | 1 |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I | 6 | | 1 |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | 1 |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III | 8 | | √ |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | √ |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | 1 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable. | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | ✓ | |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | 1 |
| С | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | 1 |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | 1 |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | ✓ | |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. | 11f | | 1 |
| 12 a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | 1 |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional. | 12b | | 1 |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | 1 |
| 14 a | 3 | 14a | | 1 |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV. | 14b | | 1 |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | / |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV. | 16 | | 1 |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | √ |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II. | 18 | | 1 |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | √ |
| 20 a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | 1 |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | ' ' |

| Part | Checklist of Required Schedules (continued) | | <u>_</u> | ugo . |
|----------|---|------------|----------|----------|
| Part | Checklist of nequired Scheddles (continued) | | Yes | No |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | 1 |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | 1 |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | 23 | | 1 |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | 1 |
| b c | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I | 24d 25a | | |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | |
| 26 | Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II | 26 | | 1 |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | 1 |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| a b | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a 28b | | 1 |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | 1 |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 30 | | 1 |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | 1 |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | 1 |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | 1 |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | 1 |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | ✓ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | | | , |
| 38 | Part VI | 37 | 1 | ✓ |
| | | | 000 | /2012 |

| Part | | | | |
|--------|--|----------|----------|--|
| | Check if Schedule O contains a response or note to any line in this Part V | • • | | |
| | 1 1 1 | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable | | | ' |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | | <u></u> | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | -10 | | |
| La | Statements, filed for the calendar year ending with or within the year covered by this return 2a 32 | ŀ | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | / | |
| - | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions) | | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | 1 |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | ١, |
| | account)? | 4a | | / |
| b | If "Yes," enter the name of the foreign country: | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | <i>,-</i> |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5a 5b | | ✓ |
| b C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | _ |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | - |
| | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | 1 |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| _ | and services provided to the payor? | 7a 7b | | |
| b | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | 75 | | |
| · | required to file Form 8282? | 7c | | 1 |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | 1 | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | | | |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | ۰ | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b] | | | 1 |
| 11 | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | | ļ | |
| a b | Gross income from other sources (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | ^ - |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | , | 1 |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | <u> </u> | | ļ |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | ļ | |
| b | Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| IJ | the organization is licensed to issue qualified health plans | | ŀ | |
| С | Enter the amount of reserves on hand | 1 | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. | 14b | | T |

| Part | Governance, Management, and Disclosure For each "Yes" response to lines 2 this response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes | | | | | | |
|----------|---|--------------------|----------|--------|---|--|--|
| | Check if Schedule O contains a response or note to any line in this Part VI | | | • | . 🗸 | | |
| Secti | on A. Governing Body and Management | | | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1 a 1 | 8 | Yes | No | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | <u>•</u> | | | | |
| b 2 | Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business rany other officer, director, trustee, or key employee? | | 2 | | 1 | | |
| 3 | Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other | | 3 | | 1 | | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 99 | 0 was filed? | 4 | | 1 | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | | | | | | |
| 6 7a | | | | | | | |
| b | Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body? | by) members, | 7b | ✓ | | | |
| 8 | Did the organization contemporaneously document the meetings held or written actions until the year by the following: | dertaken during | | | į | | |
| а | The governing body? | | 8a | 1 | | | |
| b | Each committee with authority to act on behalf of the governing body? | | _8b | ✓ | | | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | 9 | | 1 | | |
| Secti | on B. Policies (This Section B requests information about policies not required by the | | | ode.) | <u> \ </u> | | |
| | | · - | | Yes | No | | |
| 10a | Did the organization have local chapters, branches, or affiliates? | | 10a | | ✓ | | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exem | ot purposes? | 10b | _ | | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before | e filing the form? | 11a | | ✓ | | |
| b 12a | Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> | | 12a | | · | | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give | rise to conflicts? | 12b | 7 | <u> </u> | | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the particle of the describe in Schedule O how this was done. | | | 1 | | | |
| 13 | Did the organization have a written whistleblower policy? | | 13 | | 1 | | |
| 14 | Did the organization have a written document retention and destruction policy? | | 14 | ✓ | <u> </u> | | |
| 15 | Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation | | | • | | | |
| a | The organization's CEO, Executive Director, or top management official | | 15a | | 1 | | |
| b | Other officers or key employees of the organization | • • • • | 15b | | ✓ | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year? | ar arrangement | 16a | | 7 | | |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps t | safeguard the | | | V | | |
| | organization's exempt status with respect to such arrangements? | <u> </u> | 16b | | <u> </u> | | |
| | on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ N/A | - | | | | | |
| 17 18 | List the states with which a copy of this Form 990 is required to be filed NIA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply | nd 990-T (Secti | on 501 | c)(3)s | only) | | |
| 19 | Own website Another's website Upon request Other (explain in Sch Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year. | • | nterest | polic | y, and | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the boorganization: James C. Bailey, 670 E. Walton Blvd., Pontiac, MI 48340 248-373-7774 | ooks and record | s of the | e | | | |

| Daga | |
|------|--|
| raue | |

Form 990 (2013)

Form 990 (2013)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

| Check if Schedule O contains a response or note to any line in this Part VII |
|--|
|--|

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees; and former such persons

| ☐ Check this box if neither the organization | nor any relate | d org | anız | atio | n c | ompe | nsa | ited any curren | t officer, director | , or trustee. |
|--|--|-------------------------|-----------------------|---|--|---|----------|--|---|--|
| | | | | | 2) | | | | | |
| (A) Name and Title | (B) Average hours per | box. | unles | neck is pe | rson | than on the state of the state | ı an | (D) Reportable compensation | (E) Reportable compensation from | (F) Estimated amount of |
| | week (list any hours for related organizations below dotted line) | Individua or directo | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | other compensation from the organization and related organizations |
| (1) Arlando Williams | 2 | | | | | | | | | |
| Trustee | - | / | - | 1 | | | | 0 | 0 | 0 |
| (2) Jerry Coe | 2 | , | Ì | , | | | | | | |
| Trustee | | / | ├ | ✓ | - | - | | 100 | 0 | 0 |
| (3) Carl Johnson | 2 | , | | 1 | | | 1 | | | _ |
| Trustee | | V | - | V | | ļ. — | ╁ | 262 | 0 | 0 |
| (4) Michael Warchuck | 60 | } | } | 1 | | | | 44000 | | 0 |
| President | | 1 | | ₩ | | | ⊢ | 41689 | 0 | <u> </u> |
| (5) James C. Bailey | 60 | 1 | | 1 | | | | | | |
| Financial Secretary | | | - | ┡ | | - | \vdash | 82226 | - | |
| (6) Deborah Morrison | 3 | 1 | | 1 | | | | 100 | 0 | o |
| Recording Secretary | 3 | 1 | ╁ | ┡ | | | - | 100 | <u> </u> | <u> </u> |
| (7) Ramon Ruffin | | 1 | | / | | | | 1200 | 0 | o |
| Recording Secretary | 2 | <u> </u> | 1 | ╀ | ├ | - | | 1200 | | U |
| (8) Edward Briones | · | 1 | | 1 | | | | 0 | | 0 |
| 1st Vice President | 2 | | + | + | - | | 1 | · · · · · · · · · · · · · · · · · · · | - | • |
| (9) William Bynum 2nd Vice President | · - | 1 | | 1 | | | | ٥ | 0 | 0 |
| (10) Raymond Richard | 2 | | t | Ť | \vdash | | | · · · · · | - | • |
| Guide | | 1 | | 1 | | | | ٥ | 0 | 0 |
| (11) Aaron Edwards | 2 | 1 | | ┼ | | | t | - | | |
| Sgt @ Arms | · - | 1 | } | 1 | | 1 | | ٥ | 0 | 0 |
| (40) | 2 | | + | Ť | | | T | 1 | · | |
| (12) Melanie Swords Chairperson | | 1 | | 1 | | | ì | 1223 | . 0 | i |
| (42) to be 64 mont | 60 | 1 | t | Ť | | | T | 1223 | 1 | <u> </u> |
| Chairperson | | 1 | | 1 | | | | 0 | ه ا | |
| (14) Tom Kurzyniec | 60 | 1 | T | Ť | T | 1 | † | † - | 1 | |
| Chairperson | | 1 | | 1 | | | | | 0 | o |
| por our | | | - | <u>. </u> | • | | _ | | | · |

| Part | VII Section A. Officers, Directors, Trust | tees, Key E | mplo | yee <u>s</u> | | | lighes | st C | ompensated E | mployees (co | <u>ontini</u> | ıed) | | |
|---------|---|-------------------------------|-----------------------------------|-----------------------|--------------|---------------|---|-------------|--|----------------------|-----------------|----------------|--|----------|
| | | | ļ | | • | C) | | | | | | | | |
| | (A) (B) | | l (do n | ot ch | | ition more | than o | one | (D) | (E) | } | | (F) | |
| | | | | unles | s pe | rson | is both | n an | Reportable | Reportable | | | ımated | |
| | | hours per week (list any | officer and a director/trust | | | | | | compensation | compensation related | rom | | ount of other | |
| | hours for | 유진 | ᇗ | Officer | Key employee | ₽₩ | Former | the | organization | s | | ensation | n | |
| | | related | # <u>F</u> | 랿 | cer | en | bloy | mer | organization | (W-2/1099-MI | SC) | | m the | |
| | | organizations below dotted | 학교 | l on | | 흥 | 88 | | (W-2/1099-MISC) | | | | nızatıon related | |
| | | ine) | Individual trustee or director | 7 | | yee | mpe | ĺ | ĺ | | | | nizations | 3 |
| | | ļ | l e | Institutional trustee | | | Highest compensated employee | | | | 1 | | | |
| | | | | L | | | 8 | <u> </u> | | <u> </u> | _ | | | |
| 2 | an Patterson | 60 | | | | | | | | | | | | |
| Chairp | | - | } | | • | <u> </u> | | - | 0 | | -0 | | | 0 |
| Chairp | nelton Ainsworth | 2 | 1 | | 1 | | | | 0 | | 0 | | | 0 |
| | nanda McGee | 2 | | | Ť | | | | - | | | - | - | |
| Chairp | | | 1 | 1 | ✓ | | | ĺ | 0 | | o | | | 0 |
| | hn Shoun | 2 | | | | | | | | | | | | |
| Chairp | | | | | 1 | | | | 0 | | 0 | | | |
| (19) Bo | onnie Melton | 5 | | | | | | | | | | | | |
| | d Members Chairperson | | | | ✓ | ļ | | <u> </u> | 900 | | 0 | | | 0 |
| (20) | | | 1 | | | | | | | | | | | |
| (21) | | | - | | _ | - | _ | - | | | | | | |
| 35.27 | | | ţ | 1 1 | | ļ | | ĺ | Ì | i | | | | |
| (22) | | | | | | | | _ | | | $\neg \uparrow$ | | | |
| | | | | | | | | | | | | | | |
| (23) | | | | | |] | | | | | | | | |
| | | | | | | | | } | | | | | | |
| (24) | | } | | | | | | | | | - | | | |
| (25) | | | - | \vdash | | | | - | | | \dashv | | | |
| 3201 | ••••••••••••••••••••••••••••••••••••••• | | † | | | | | | | | | | | |
| 1b | Sub-total | | • | • | | | | | 127700 | | 0 | - | | 0 |
| C | Total from continuation sheets to Part | VII, Sectio | n A | | | | | > | 0 | | 0 | | | 0 |
| d | Total (add lines 1b and 1c) | <u> </u> | | | | | | > | 127700 | | 0 | | | 0 |
| 2 | Total number of individuals (including bur reportable compensation from the organi | | d to th | ose | list | ted : | above | e) w | ho received m | ore than \$10 | 0,000 | O of | | |
| | | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any former of | | | | | | | emp | oloyee, or high | est compen | sated | d | | |
| | employee on line 1a? If "Yes," complete | | | | | | | | | | • | 3 | \sqcup | ✓_ |
| 4 | For any individual listed on line 1a, is the | | | | | | | | | | | | | ı |
| | organization and related organizations | greater th | an \$ | 150, | UUU |)? /; | r "Ye | S, " | complete Sch | edule J tor | suci | | | |
| _ | individual | | | ٠. | • | | ٠ | | | • • • • • | • | . 4 | | √ |
| 5 | Did any person listed on line 1a receive of for services rendered to the organization | | | | | | | | | ation or indi | vidua | | | |
| Section | on B. Independent Contractors | | | | - | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | such person | · · · · | <u> </u> | 5_ | | √ |
| 1 | Complete this table for your five highest | compensat | ed in | depe | end | ent | contr | acto | ors that receive | ed more than | \$10 | 0.000 of | f | |
| | compensation from the organization. Rep | | | | | | | | | | | | | ìх |
| | year. | | | | | | | | | | | | | _ |
| | (A) Name and business add | iress | | | | | | | (B) Description of s | ervices | | (C) Compens | | |
| N/A | | | | | | | | - | | - | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | L | | | | | | |
| | | | | | | | | _ | | | | | | |
| | Total number of independent contractor | ors (includii | na hi | ıt n | ot I | lmit | ed to | L_ th | nose listed abo | ove) who | | | | |
| | received more than \$100,000 of compens | | | | | | | | | | | | | |

| Part VIII | | Statement of Revenue | | | | | | | | | | |
|--|----------|--|----------------------|-----------------|----------------------|--|---|--|--|--|--|--|
| | | Check if Schedule O | contains a resp | onse or note to | | | | | | | | |
| ! | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 | | | | |
| nts | 1a | Federated campaigns | 1a | 0 | | | | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues | 1b | 0 | | | | | | | | |
| s, C Am | С | Fundraising events | 1c | 0 | | | | | | | | |
| Sift | d | Related organizations | | 0 | | | | 1 | | | | |
| ıs, imi | е | Government grants (cont | tributions) 1e | 0 | | | | | | | | |
| tior sr S | f | All other contributions, gif | | | | | | | | | | |
| ibu the | | and similar amounts not inc | luded above 1f | 5523 | | | | | | | | |
| a tr | g | Noncash contributions includ | ed in lines 1a-1f \$ | 0 | | | | | | | | |
| | h | Total. Add lines 1a-1f | <u></u> | ▶ | 5523 | | | | | | | |
| Program Service Revenue | | | | Business Code | | | | · | | | | |
| yer | 2a | Regular & Sub Dues | | 900099 | 807042 | 0 | 0 | 0 | | | | |
| æ | b | Bonus & Profit Sharing | | 900099 | 98217 | . 0 | 0 | 0 | | | | |
| Α̈́ς | С | Retired Members Dues | | 900099 | 113852 | 0 | 0 | 0 | | | | |
| Ser | d | Social & Recreational A | Activities | 900099 | 58727 | 0 | 0 | 0 | | | | |
| E | е | Initiation Fees | | 900099 | 1830 | 0 | 0 | . 0 | | | | |
| ogr. | f | All other program serv | | 0 | 0 | 0 | 0 | | | | | |
| <u> </u> | g | Total. Add lines 2a-2f | | | 1079668 | | | <u> </u> | | | | |
| | 3 | Investment income (| | ends, interest, | | | | | | | | |
| | | and other similar amo | • | | 33 | 0 | 0 | 0 | | | | |
| | 4 | Income from investment | | ond proceeds ► | 0 | 0 | 0 | 0 | | | | |
| | 5 | Royalties | (A Do-1 | > | 0 | 0 | 0 | 0 | | | | |
| | | | (i) Real | (ii) Personal | ʻ | | | | | | | |
| | 6a | Gross rents | 4200 | | | | | | | | | |
| | b | Less. rental expenses | 4126 | | İ | | | | | | | |
| | C | Rental income or (loss) | 74 | | | | | | | | | |
| | d | Net rental income or (| (i) Secunties | | 74 | 0 | 0 | 0 | | | | |
| | 7a | Gross amount from sales of assets other than inventory | | | | | | | | | | |
| | | Less, cost or other basis | 0 | 0 | | | | | | | | |
| | b | and sales expenses | | | | • | | | | | | |
| | _ | · · | 0 | 0 | | | | | | | | |
| | C | Gain or (loss) . | 0 | 0 | | | | | | | | |
| | d | Net gain or (loss) . | | | 0 | 0 | 0 | | | | | |
| enue | 8a | Gross income from fu events (not including \$ | 0 | | 16. | | , | | | | | |
| Other Reven | | of contributions reported See Part IV, line 18 | а | 0 | | | | | | | | |
| ಠ | b | Less. direct expenses | | 0 | | | | | | | | |
| | C | Net income or (loss) fr Gross income from ga | | events | 0 | | 0 | <u> </u> | | | | |
| | 9a | | • | | | | • | | | | | |
| | | | | 0 | } | | | | | | | |
| | b | Less: direct expenses Net income or (loss) fi | | vities • | | | | | | | | |
| | 100 | Gross sales of in | | vides P | 0 | 0 | 0 | <u> </u> | | | | |
| | IVa | returns and allowance | | | ' | | | | | | | |
| | | | u | 1128 | | | |] | | | | |
| | b | Less: cost of goods s Net income or (loss) fi | | | | | | | | | | |
| | <u>c</u> | Miscellaneous R | | Business Code | (769) | . 0 | 0 | <u> </u> | | | | |
| | 44- | | | | | - | | | | | | |
| | 11a | Misc. Reimbursement | | 900099 | 25251 | 0 | 0 | · · · · · | | | | |
| | b | Strike Fund Rebate | | 900099 | 12671 | 0 | | | | | | |
| | C | From Members for Dist | pursement on | 900099 | 4401 | 0 | <u> </u> | | | | | |
| | d | All other revenue . Total: Add lines 11a- | | 900099 | 299 | 0 | 0 | | | | | |
| | 12 | Total: Add lines 11a- | | | 42622 | | | _ | | | | |

Part IX Statement of Functional Expenses

| Sectio | n 501(c)(3) and 501(c)(4) organizations must con | nplete all columns. A | ll other organization | s must complete co | lumn (A) |
|----------|---|-----------------------|------------------------------------|---|--|
| | Check if Schedule O contains a respon | se or note to any lin | ne in this Part IX . | | <u> </u> |
| | t include amounts reported on lines 6b, 7b, , and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the United States See Part IV, line 21 | 0 | 0 | | |
| 2 | Grants and other assistance to individuals in the United States. See Part IV, line 22 | 0 | 0 | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | 0 | 0 | | |
| 4 5 | Benefits paid to or for members | 0 | 0 | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 127700 | 0 | 0 | |
| 7 | Other salaries and wages | 78681 | 0 | 0 | 0 |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 7624 | 0 | 0 | 0 |
| 9 | Other employee benefits | 98495 | 0 | 0 | 0 |
| 10 | Payroll taxes | 19482 | 0 | 0 | 0 |
| 11 a | Fees for services (non-employees): Management | اه | o | o | n |
| b | Legal | 250 | 0 | 0 | 0 |
| С | Accounting | 0 | 0 | 0 | 0 |
| d | Lobbying | 0 | 0 | 0 | 0 |
| e | Professional fundraising services See Part IV, line 17 | 0 | | | 0 |
| f | Investment management fees | 0 | 0 | 0 | 0 |
| 9 | Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 15737 | 0 | 0 | 0 |
| 12 | Advertising and promotion | 0 | 0 | 0 | 0 |
| 13 | Office expenses | 56122 | 0 | 0 | 0 |
| 14 | Information technology | 3332 | 0 | 0 | 0 |
| 15 16 | Royalties | 76670 | 0 | 0 | 0 |
| 17 | Travel | 1550 | 0 | 0 | 0 |
| 18 | Payments of travel or entertainment expenses | 1330 | | | |
| | for any federal, state, or local public officials | اه | 0 | 0 | 0 |
| 19 | Conferences, conventions, and meetings . | 68712 | 0 | 0 | 0 |
| 20 | Interest | 0 | 0 | 0 | 0 |
| 21 | Payments to affiliates | 481299 | 0 | 0 | 0 |
| 22 | Depreciation, depletion, and amortization . | 0 | 0 | 0 | 0 |
| 23 | Insurance | | 0 | 0 | 0 |
| 24 | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If | | • ! | | |
| | line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| а | Recreational Activity | 74719 | 0 | 0 | 0 |
| b | Donations | 15074 | 0 | 0 | 0 |
| C | From Members for Disbursement on Their B | 2424 | 0 | 0 | 0 |
| d | Misc. Reimbursement | 561 | 0 | 0 | 0 |
| е 25 | All other expenses Total functional expenses. Add lines 1 through 24e | 2205 1130637 | 0 | 0 | 0 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720) | 1130637 | U | <u> </u> | 0 |

Total net assets or fund balances

Total liabilities and net assets/fund balances . . .

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash—non-interest-bearing Savings and temporary cash investments Pledges and grants receivable, net Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. O Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net . Inventories for sale or use Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 10b 2528606 10c Investments – publicly traded securities Investments—other securities. See Part IV, line 11 . Investments—program-related. See Part IV, line 11 Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) . Accounts payable and accrued expenses . . . Deferred revenue Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D. οl Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L ol Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties 0 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . . Retained earnings, endowment, accumulated income, or other funds

| Page | 12 | |
|------|----|--|
| 9- | | |

| | | | | | | <u> </u> |
|------|---|---|----------|-------------|----------|---------------|
| Part | XI Reconciliation of Net Assets | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI | | | | <u> </u> | ✓ |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | | | 112 | <u> 27151</u> |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | _ | 11: | 30637 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | (| 3486) |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | | 28 | <u>84893</u> |
| 5 | Net unrealized gains (losses) on investments | 5 | | | | 0 |
| 6 | Donated services and use of facilities | 6 | | | | 0 |
| 7 | Investment expenses | 7 | | | | 0 |
| 8 | Prior period adjustments | 8 | | | | 30 |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | | (660) |
| 10 | Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line | | | | | |
| | 33, column (B)) | 10 | | | 28 | <u>80777</u> |
| Part | XII Financial Statements and Reporting | | | | | _ |
| | Check if Schedule O contains a response or note to any line in this Part XII | <u>· · · </u> | <u> </u> | | | ᆜ |
| | | | _ | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other | | _ | | | ì |
| | If the organization changed its method of accounting from a prior year or checked "Other," ex | piain | in | | | 1 |
| | Schedule O. | | - | | | ا ا |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | | 2a | | ✓ |
| | If "Yes," check a box below to indicate whether the financial statements for the year were com- | plied | or | | | |
| | reviewed on a separate basis, consolidated basis, or both. | | | - 1 | | |
| _ | Separate basis Consolidated basis Both consolidated and separate basis | | - | <u> </u> | | |
| b | Were the organization's financial statements audited by an independent accountant? | | <u>;</u> | 2b | | V |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both: | ea on | a | | | |
| | · | | | | | |
| _ | Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o | verein | ht | | | ا |
| Ç | of the audit, review, or compilation of its financial statements and selection of an independent accounts. | | | 2c | | |
| | If the organization changed either its oversight process or selection process during the tax year, ex | | _ ⊨ | 20 | | |
| | Schedule O. | اسماح | | | | |
| За | As a result of a federal award, was the organization required to undergo an audit or audits as set | forth | լո Ի | | | i |
| Ja | the Single Audit Act and OMB Circular A-133? | | . | За | | 1 |
| ь | If-"Yes," did the organization undergo the required audit or audits? If the organization did not under | erao th | ne H | Ju | | |
| 5 | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a | | | 3b | | |
| | | | | | 990 | (2013) |
| | | | | | | ,, |

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

| Name o | t the organization | | Employ | er iden | tification number |
|----------|---|--|----------------------|----------|---------------------------------|
| Interna | tional Union, UAW, Local 653 | | | | 38-1119397 |
| Par | | r Advised Funds or Other Similar Fur | nds or | Acco | |
| | | ered "Yes" to Form 990, Part IV, line 6. | | | |
| | · · · · · · · · · · · · · · · · · · · | (a) Donor advised funds | (| (b) Fund | ds and other accounts |
| 1 | Total number at end of year | N/A | | | |
| 2 | Aggregate contributions to (during year) . | | | | |
| 3 | Aggregate grants from (during year) | | | | _ |
| 4 | Aggregate value at end of year | | | | |
| 5 | Did the organization inform all donors and | donor advisors in writing that the assets h | neld in d | donor | advised |
| • | funds are the organization's property, subject | - | | | |
| 6 | Did the organization inform all grantees, dor | - | | | |
| J | only for charitable purposes and not for the | | | | |
| | • | · · · · · · · · · · · · · · · · · · · | | | |
| Par | | | | | |
| r ai | | ered "Yes" to Form 990, Part IV, line 7. | | | |
| 4 | Purpose(s) of conservation easements held by | | | | |
| 1 | • • • • | | f on bus | torioo | lly important land area |
| | Preservation of land for public use (e.g., i | · | | | istoric structure |
| | Protection of natural habitat | ☐ Preservation C | n a ceru | nea n | istoric structure |
| • | Preservation of open space Complete lines 2a through 2d if the organiza | tion hold a qualified consequation contribute | on in the | s form | of a concentation |
| 2 | easement on the last day of the tax year. | tion held a qualified conservation contributi | יונו וווי נווני ו | | Held at the End of the Tax Year |
| | | | <u> </u> | + | |
| a | Total number of conservation easements . | | • • | 2a | N/A |
| b | Total acreage restricted by conservation eas | | | 2b | |
| C | Number of conservation easements on a cer | | | 2c | |
| d | Number of conservation easements includ | | | ٠. ا | |
| _ | historic structure listed in the National Regis | | L | 2d | a araanization divine the |
| 3 | Number of conservation easements modified | i, transferred, released, extinguished, or ter | minated | by tr | e organization during the |
| _ | tax year ► | | | | |
| 4 | Number of states where property subject to | | | | |
| 5 | Does the organization have a written poliviolations, and enforcement of the conservat | | | | - |
| | | | | | |
| 6 | Staff and volunteer hours devoted to monito | ring, inspecting, and enforcing conservation | ı easem | ents t | during the year |
| 7 | Amount of our appear in our red in monitoring | unanceting and enforcing consequation and | | A | n the |
| 7 | Amount of expenses incurred in monitoring, ►\$ | inspecting, and enforcing conservation eas | ements | aurin | g the year |
| | Does each conservation easement reported | on line O(d) above patrative the recovery | of acotu | an 17 | 0/b\/4\/D\ |
| 8 | (i) and section 170(h)(4)(B)(ii)? | of the 2(d) above satisfy the requirements | OI SECIII | JII 17 | |
| | | | | | · · L Yes L No |
| 9 | In Part XIII, describe how the organization re | | | • | • |
| | balance sheet, and include, if applicable, the organization's accounting for conservation e | | ilaliciai : | staten | nerits that describes the |
| Par | | ctions of Art, Historical Treasures, o | Othor | · Cim | ilar Assats |
| rai | | ered "Yes" to Form 990, Part IV, line 8. | | SIIII | liai Assets. |
| | | | | | ******* |
| ıa | If the organization elected, as permitted und works of art, historical treasures, or other | | | | |
| | public service, provide, in Part XIII, the text of | | | | |
| L | | | | | |
| b | If the organization elected, as permitted un | | | | |
| | works of art, historical treasures, or other public service, provide the following amount | | uucatioi | i, Oi | research in futilierance of |
| | | • | | _ | |
| | (i) Revenues included in Form 990, Part VIII, | | | , , | N/A |
| 0 | (ii) Assets included in Form 990, Part X | | | J | > \$ |
| 2 | If the organization received or held works | | | s ior | imancial gain, provide the |
| | following amounts required to be reported u | • | | | |
| a | Revenues included in Form 990, Part VIII, lin | e1 | | ,) | \$ |
| h | Assets included in Form 990 Part Y | | | | . • |

| 3 Using the organizaton's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply): a □ Public exhibition | Part | III Organizations Maintaining | | | | | | | |
|---|------|--|-----------------------|------------------------|------------|---------------|-----------|---------------------|------------------------|
| b Scholarly research c Other N/A | 3 | | | her recor | ds, chec | k any of the | e follow | ing that are a | significant use of its |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, clid the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No Port IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, funstea, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C | а | ☐ Public exhibition | | d | ☐ Loan | or exchang | e progr | ams | |
| c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, clid the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Ves No Port IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, funstea, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b If "Yes," explain the arrangement in Part XIII and complete the following table: C | b | ☐ Scholarly research | | е | Other | N/A | | | |
| XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? | С | | | | | | | | |
| Part IV Scrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance 1d | 4 | | tion's collections a | and expla | an how t | hey further | the org | anization's exe | mpt purpose in Part |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? | 5 | | | | | | | | |
| 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Ves □ No b If Yes,* explain the arrangement in Part XIII and complete the following table: □ Beginning balance . □ 1 | Part | | | | | | | | |
| Included on Form 990, Part X? | | 990, Part X, line 21. | | | | | | | |
| C Beginning balance | | included on Form 990, Part X? | | | | | | | |
| d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 2b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Curnert year (b) Pror year (c) Two years back (d) Three years back (e) Four y | b | If "Yes," explain the arrangement in P | art XIII and comple | ete the fo | llowing ta | able: | | T 7 | Amount |
| d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? 2b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. (a) Curnert year (b) Pror year (c) Two years back (d) Three years back (e) Four y | С | Beginning balance | | | | | 1c | | N/A |
| Distributions during the year 1 | d | • | | | | | 1d | | |
| 2a Did the organization include an amount on Form 990, Part X, line 21? | е | | | | | | 1e | | |
| Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. | f | | | | | | | | |
| Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance | | | | | | | | | |
| Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back | | | art XIII. Check her | e if the ex | xplanatio | n has been | provide | ed in Part XIII . | <u> </u> |
| (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (d) Three years back three (d) Three years back three (d | Par | | | | | | 4.0 | | |
| Beginning of year balance N/A N/A Net investment earnings, gains, and losses N/A Net investment earnings, gains, and losses N/A Net investment earnings, gains, and losses Net investment earnings, gains, and losses Net investment earnings, gains, and losses N/A Net investment earnings, gains, and losses N/A Net investment N/A Net investm | | Complete if the organization | | to Fori | n 990, P | art IV, line | IU. | (d) Three years beg | ok (a) Four years back |
| b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Describe of property (a) Cost or other basis (b) Cost or other basis (cother) (cother) (c) Accumulated depreciation 1a Land 0 138500 138500 138500 138500 138500 138500 138500 138500 138500 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 4 | December of wear belong | | (0) PII | or year | (c) Two years | S DACK | (d) Three years bac | (e) Four years back |
| c Net investment earnings, gains, and losses | _ | | | | | | | | |
| e Other expenditures for facilities and programs | _ | Net investment earnings, gains, and | | | | | | | |
| f Administrative expenses | d | Grants or scholarships | | | | | | | |
| Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | е | • | | - | | | | | |
| Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | f | Administrative expenses | | | | | | | |
| a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | g | | | <u> </u> | | | | | |
| b Permanent endowment % c Temporarily restricted endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | 2 | | | | e (line 1g | j, column (a |)) held a | as: | |
| Temporarily restricted endowment ► % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | _ | Board designated or quasi-endowme | nt ▶ | % | | | | | |
| The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | | | % | | | | | | |
| Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations | С | - | * | 2004 | | | | | |
| Organization by: Yes No | 20 | | | | zation th | at are hold | and ad | ministered for t | ha |
| (i) unrelated organizations | Ja | | e possession or ti | ie Organi | zauon un | at are nero | anu au | illillistered for t | |
| (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (ninvestment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value 1a Land | | - | | | | | | | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d | | | | | | | | | |
| Part VI Land, Buildings, and Equipment. Complete If the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 138500 138500 138500 b Buildings 0 2134313 0 2134313 c Leasehold improvements 0 0 0 0 d Equipment 0 255784 0 255784 e Other 0 0 0 0 | b | | nzations listed as r | equired o | on Sched | ule R? . | | | |
| Complete If the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land 0 138500 138500 b Buildings 0 2134313 0 2134313 c Leasehold improvements 0 0 0 0 0 d Equipment 0 255784 0 255784 0 0 e Other 0 0 0 0 0 0 | 4 | Describe in Part XIII the intended use | s of the organization | on [;] s endo | owment f | unds. | | | |
| Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value | Part | | | | | | | | |
| (investment) (other) depreciation 1a Land 0 138500 138500 b Buildings 0 2134313 0 2134313 c Leasehold improvements 0 0 0 0 0 d Equipment 0 255784 0 255784 0 0 e Other 0 0 0 0 0 0 | | Complete if the organization | n answered "Yes | " to For | m 990, F | Part IV, line | 11a. S | See Form 990 | , Part X, line 10. |
| b Buildings | | Description of property | | | | | | I | (d) Book value |
| c Leasehold improvements 0 0 0 0 d Equipment 0 255784 0 255784 e Other 0 0 0 0 | 1a | | | 0 | | 138500 | | | 138500 |
| d Equipment | b | • | | | | 2134313 | | o _ | 2134313 |
| e Other 0 0 0 0 | | · | | | ···· | | | 0 | 0 |
| | | Ou ' | • | | | Ī | | | 255784 |
| | | | must equal Form 9 | | | |)/cl | 0 | |

| Part VII | Investments—Other Securities. Complete if the organization answ | | m 990. Part I | V line 1 | 1b. See Form | 990. Part X. line 12. |
|------------------|---|----------------------|-------------------|------------|------------------|---|
| | (a) Description of security or category (including name of security) | | (b) Book val | | (c) Meti | nod of valuation of-year market value |
| (1) Fınancial | derivatives | | | | | |
| | neld equity interests | | | | | |
| | | | | | | |
| (A) N/A | | | | | | |
| (B) | | | | | | |
| (C) | | | | | | |
| (D) | | | | | | |
| (E) | | | | | | |
| (F) | | | | | | |
| (G) | | | | | | |
| (H) | | | | | | |
| Total, (Column (| b) must equal Form 990, Part X, col. (B) line 12) ▶ | | | | · | |
| Part VIII | Investments - Program Related | | | • | | |
| | Complete if the organization answ | | m 990, Part | V, line 1 | 1c. See Form | 990, Part X, line 13. |
| | (a) Description of investment | | (b) Book va | - | (c) Met | hod of valuation -of-year market value |
| (1) Loan to | International Union, UAW | | | 00000 Co | ost | |
| _(2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | <u> </u> |
| (6) | <u> </u> | | | | | |
| _(7) | | | | | · | |
| (8) | <u> </u> | | | | | |
| (9) | | | | | | |
| | b) must equal Form 990, Part X, col (B) line 13.) ▶ | | L | | | |
| Part IX | Other Assets. | | | | | |
| | Complete if the organization ansi | | m 990, Part | V, line 1 | 1d. See Form | |
| | (a | i) Description | | | | (b) Book value |
| (1) N/A | | | | | | |
| (2) | | | | | | |
| _(3) | | | | | | |
| _(4) | | | | | | <u> </u> |
| _(5) | | | | | | |
| _(6) | | | | | | |
| _(7) | | ·· | | | | |
| _(8) | | | | | | |
| (9) | 4 | 1 (0) () (5) | | | | |
| | mn (b) must equal Form 990, Part X, co | oi (B) line 15.) . | | | <i></i> . ► | |
| Part X | Other Liabilities. Complete if the organization ansuline 25. | wered "Yes" to For | m 990, Part | IV, line 1 | 1e or 11f. See | Form 990, Part X, |
| 1. | (a) Description of liability | (b) Book value | | | | |
| (1) Federal II | ncome taxes | | 0 | | | |
| (2) Per Car | pita Taxes | | 36801 | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| (5) | | | | | | |
| (6) | | | | | | |
| (7) | • | | | | | |
| (8) | | | | | | |
| (9) | | | | | | |
| Total. (Column | (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | | 36801 | | | · . |
| | r uncertain tax positions. In Part XIII, provi | | | | | |
| organization | 's liability for uncertain tax positions under | FIN 40 (ASC 740). Ch | eck here it the 1 | EXI OI ING | iootnote nas bee | ni provided in Part XIII |

| Part | | ie per Return. | |
|--------|---|----------------|-----------------|
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. | | |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | N/A |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | <u> </u> | |
| b | Donated services and use of facilities | | |
| C | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIII.) | 2e | |
| е 3 | Subtract line 2e from line 1 | 3 | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | • | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| b | Other (Describe in Part XIII.) | | |
| c | Add lines 4a and 4b | 4c | |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) | | |
| Part | XII Reconciliation of Expenses per Audited Financial Statements With Expen | | |
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. | • | |
| 1 | Total expenses and losses per audited financial statements | 1 | N/A |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| а | Donated services and use of facilities | | |
| b | Prior year adjustments | | |
| C | Other losses | | |
| d | Other (Describe in Part XIII.) | | |
| е | Add lines 2a through 2d | 2e | |
| 3 | Subtract line 2e from line 1 | 3 | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| b | Other (Describe in Part XIII) | | |
| С 5 | Add lines 4a and 4b | | |
| _ | XIII Supplemental Information. | . 3 | |
| | de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b t XI, lines 2d and 4b. Also complete this part to provide any addi | | 4; Part X, line |
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| | | | |
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| | | | |

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

20**13**

Employer Identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

| International Union ,UAW,Local 653 | 38-1119397 |
|--|---|
| Part I, Line 1: and related activities which further the common interests of the membership. | |
| Part VI, Section A, Line 6: Anyone who has applied for and been accepted for membership is a regula | r member. |
| Part VI, Section A, Line 7b: All decisions are subject to membership approval. | |
| Part VI, Section B, Line 11b: There is no process used by the organization to review this form before f | iling. |
| Part VI, Section B, Line 12c: All officers are covered under the policy. Local Unions may determine if | conflicts exist by constitutionally |
| required trustee audits and the review of monthly financial reports. The parent organization also concerns | lucts periodic audits. Restrictions |
| imposed are described in the International Constitution. | |
| Part VI, Section C, Line 19. Copies are provided upon request | |
| Part X, Line 2, Column A: This amount has been increased by \$30 due to the voiding of an outstandin | g check that was written in prior year. |
| Part XI, Line 9: Difference between payables 2012 (39,916) and payables 2013 (40,567). Total (651). Di | ifference between fixed assets |
| 2012 (2,528,606) and fixed assets 2013 (2,528,597). Total (9) | |
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